File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A

Reset Form



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Des Moines, Iowa 50319 Fax: 515-281-4073	FOR INSTRUCTIONS,				
	DISCLOSURE SU		200	8 NOY -7 A	M 0 5-
[same as on Statement of Organiza	tion)		·	n 9:53
Committee to Re-Elect Ree	ed, Supervisor			FORM	1
(1)Statewide/Legislative/Judge S	of committee you are reporting for: 5 Standing for Retention Candidate (2)Sta 5)County Candidate (6)City Candidate	ate PAC (3)State Party		DR-2 (Rev. 07/2007)	DISCLOSURE REPORT
Subdivision Candidate (8)Count 11) Local Ballot Issue	by PAC (9) City PAC (10) School Board	(/)School Board or Other Politic for Other Political Subdivision PA	al C (For Office Use Or Comm. #	
CANDIDATE COMMITTEES	ONLY:		_		
Candidate Name David W. Reed		Political Party (if applicable)			
		Democrat	11	Computer	
Office Sought County Supervisor		District (if Senate or House)		Audited	
Ate reports are subject to possit Signature of Person Fil	ole civil and criminal penalties. Pursual	1 to lowa Code sections 68B.32 515-598-504 TELEPHONE	A(7) and (68A.401(3), the ca	8
I AM FILING A October 19th		REPORT FOR (1) ELECTION	I /(2)NON	I-ELECTION YE	AR.
(re	port date)	Indicate by			
☐CHECK IF AMENDMENT TO	O REPORT DATED		Local Co	mmittees, enter Da	to of Election
			2002.00	minicos, cinei De	TO CIECIOI
You must continue to	tion) report and attach Notice of Dis offile reports until a DR-3 is filed.)	solution Form DR-3.	County & which Ele	Local Committees ection is held	, enter County in
STATEM	ENT OF CASH ON HAND				
committee. This amo	ing of the reporting period. (Total of unt MUST be the same as the cash eriod or must be zero if this is first re	on hand at the end	•	27.39	
	TAKEN IN THIS PERIOD		Ψ		
	ontributions total (Attach Schedule A) (*also see in-kind below)		0.00	
	eceived total (Attach Schedule F)	· ·		435.60	O-
	les of Campaign Property (Attach S			0.00	······································
	applies to Candidates' Committee	es Only)		462.99	n 1 2G
QUETPACT TOTAL	MONEY SPENT THIS PERIOD	SUB-TOTAL			21,01
	tures total (Attach Schedule B) (**ak	an and dalah and last a buller V		0.00	
	payments total (Attach Schedule F).	•		27.39	***************************************
	this reporting period (if final report be			-	
	ule D - Attach Schedule D)				
	rom Schedule E - Attach Schedule E			***************************************	
	m Schedule F - Attach Schedule F).			***************************************	
CONSULTANT BREAKDOWN			·····•		NO
CANDIDATE COMMITTEES OF	•				140
	ERTY (From Schedule H - Attach Sc	therfule H)	•	0.00	

<u>STATE COMMITTEES:</u> Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM

OR INSTRUCTIONS, SEE BACK OF FORM		SCHEDULE	
COMMITTEE NAME (Must be same as on Statement of Organization) Committee To Re-Elect Reed, Supervisor		(Rev. 06/97)	IN-KIND CONTRIBUTIONS
	Reset Form		CTHIS BOX IF DING FORM

DATE RECEIVED	NAME AND ADDRESS	RELATIONSHIP	DESCRIPTION	ESTIMATED	√ IF FOR
(MM/DD/YR)	OF CONTRIBUTOR	TO CANDIDATE * (if applicable)	OF IN KIND CONTRIBUTION	FAIR MARKET VALUE	FUND-RAISER CONTRIBUTION
10/20/08	David W. Reed 820-15th Street Boone, Iowa 50036		Ads FORGIVEN LOANS	\$ 408.21	
			SUB-TOTAL	\$	· · · · · · · · · · · · · · · · · · ·
			TOTAL (if last	\$	
			page of this schedule)	408.21	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule E)

MMITTEE NA	ME(Must be same as on Statement of Organization)	RESET	SCHEDULE
	e-Elect Reed, Supervisor		(Rev. 02/08) RECE
E: This scheo	Tule reports money loaned to the committee which is deposited in OANS FROM LAST REPORTING PERIOD \$ 435.60	the committee account.	CHECK THIS BO
TI- MONETA (Original	ARY LOANS RECEIVED THIS REPORTING PERIOD source of loan, such as a bank, must be shown if a third party is a	involved. Include loans from candida	ate's personal funds.)
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
			\$
T II - MONE	TARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD torgiven must be reported on Schedule E In-kind Contributions.	TOTAL (PART I)	\$
(Loans)	orgiven must be reported on Schedule E In-kind Contributions.) NAME AND ADDRESS OF LENDER	RELATIONSHIP TO	\$AMOUNT REPAID
(LOBINS)	orgiven must be reported on Schedule E In-kind Contributions.)	· •	
DATE PAID MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) David W. Reed 820-15th Street	RELATIONSHIP TO	AMOUNT REPAID
OATE PAID	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) David W. Reed 820-15th Street	RELATIONSHIP TO	AMOUNT REPAID
DATE PAID MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) David W. Reed 820-15th Street	RELATIONSHIP TO	AMOUNT REPAID
OATE PAID	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) David W. Reed 820-15th Street Boone, Iowa 50036	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID

*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.

Page 1 of 1 (for Schedule F)